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MENDMENT	TRANSMITTAL	LETTER
VIATE TATE TATE TATE	INAMONIIIAL	

Docket No. 5180-0101PUS1

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Application No.	Filing Date	Examiner	Art Unit
09/624,013-Conf. #4603	July 21, 2000	P. Parthasarathy	2136

Applicant(s): Torben JESPERSEN et al.

Invention: A METHOD FOR PERFORMING A TRANSACTION OVER A NETWORK

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

		CLAIR	IS AS AMEN	DED		
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present		Rate	
Total Claims	31	- 27 =	4	X	25.00	100.00
ndependent Claims	4	- 3 =	1	Х	100.00	100.00
Multiple Depend	dent Claims (ch	eck if applicat	ole)			
Other fee (please specify): Extension for response within first month				60.00		
TOTAL ADDIT	IONAL FEE FO	OR THIS AMI	NDMENT:			260.00
Large Entity				x	Small Entity	
_ ` `	al fee is require	d for this ame	andment			
	ar ice io require					
	ge Deposit Acc	——————————————————————————————————————		n the ai	mount of \$ _	
A check in the	he amount of \$	260.00	is enclo	sed.		
Payment by	credit card. Fo	orm PTO-203	8 is attached.			
	r is hereby auth d below. A dup					o. <u>02-2448</u>
	ny overpaymer					
x Oharge	any additional fil	நிg or applicat	on processing	fees red	quired under 3	37 CFR 1.16 and 1.17.
	(' · ')	1~				January 27, 2006
Joe McKinney Attorney Reg. I		#43	360			
	ART, KOLASC	H & BIRCH, I	.LP			
8110 Gatehous						
Suite 100 East P.O. Box 747						
	/irginia 22040-	0747				
(702) 205 2026						

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(703) 205-8026

PTO/SB/17 (12-04v2) Approved for use through 7/31/2006. OMB 0651-0032

Under the Paperwork Reduction	on Act of 1995	i, no person are required to			emark Office; U.S. DE ation unless it display		
\$			mplete if Knov				
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application	Number	09/624,013-C	onf. #4603		
FEE TRANSMITTAL		Filing Date		July 21, 2000			
For FY 2005		First Name		Torben JESPERSEN			
			Examiner N	ame	P. Parthasarathy		
X Applicant claims small e	ntity status.	See 37 CFR 1.27	Art Unit		2136		
TOTAL AMOUNT OF PAYM	ENT	(\$) 260.00	Attorney Do	cket No.	5180-0101PU	S1	
METHOD OF PAYMENT	(check all t	hat apply)					
X Check Credit Car	rd N	Money Order No	one Ot	ther (please ide	entify):		
Deposit Account Deposit	Account Numb	per: 02-2448 Deposit Ar	ccount Name:	Birch, S	tewart, Kolasch	n & Birch, L	LP
For the above-identifi	ed deposit a	account, the Director i	is hereby auth	orized to: (ch	eck all that apply))	
Charge fee(s) ir	ndicated bel	low	C	harge fee(s) i	ndicated below, e	except for th	e filing fee
Charge any address fee(s) under 37		s) or underpayment of and 1.17	f x Cr	redit any over	payments		
FEE CALCULATION							
1. BASIC FILING, SEARCH,	AND EXAM	INATION FEES					
			ARCH FEES		INATION FEES	}	
Application Type	Fee (\$)	Small Entity Fee (\$) Fee (\$	Small En \$) Fee (\$		Small Entity) Fee (\$)	Fees P	aid (\$)
Utility	300	150 500		200	100	*	
Design	200	100 100	50	130	65		
Plant	200	100 300	150	160	80		
Reissue	300	150 500	250	600	300		
Provisional	200	100 0	0	0	0		
2. EXCESS CLAIM FEES							Small Entity
Fee Description	,					Fee (\$)	Fee (\$)
Each claim over 20 (includin						50 200	25
Each independent claim over Multiple dependent claims	3 (includin	ig Keissues)				200 360	100 180
Total Claims Extra Cl	l-ima E	(t) Foo	Paid (\$)	1	Multiple Depend		100
31 - 27 = 4			00.00	•		Fee Paid (\$)	1
	^ =	<u>.0.00</u> =	50.55	-	00 141		.
Indep. Claims Extra Cl	lai <u>ms</u> F	Fee (\$) Fee	Paid (\$)	-			_
4 -3= 1	× <u>1</u> /	00.00 = 10	00.00				
3. APPLICATION SIZE FEE							
If the specification and draw							
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
- 100 = /50 (round up to a whole number) x =							
4. OTHER FEE(S)			_			Fees F	Paid (\$)
Non-English Specification							
Other (e.g., late filing sure	:harge): <u>22</u>	51 Extension for re	sponse with	in first mont	h	60	0.00
SUBMITTED BY		7	T Registration No				

Name (Print/Type) Joe McKinney Muncy

Registration No. (Attorney/Agent)

A 4 4 3 366 32,334 Telephone (703) 205-8000 January 27, 2006 Date